In the Claims:

Please cancel without prejudice claims 5 to 10 and amend claims 11 to 13 as follows:

Claims 1 to 4 (previously canceled).

11(currently amended). A method of treating hyperinsulinemia, said method comprising administering a pharmaceutically effective amount of melatonin for inhibiting insulin release to a living being suffering from said hyperinsulinemia, wherein said melatonin acts to inhibit said insulin release by interacting with a melatonin-specific receptor in β-cells of pancreatic islets in said living being suffering from said hyperinsulinemiaThe method as defined in claim 9, wherein said pharmaceutically effective amount of said melatonin at least one compound is from 0.01 to 200 mg.

12(currently amended). <u>A method of treating hyperinsulinemia</u>, said method comprising administering a pharmaceutically effective amount of melatonin for inhibiting insulin release to a living being suffering from said hyperinsulinemia, wherein said melatonin acts to inhibit said insulin release by interacting with a melatonin-specific receptor in β-cells of pancreatic islets in said living being suffering from said hyperinsulinemiaThe method as defined in claim 9, wherein said administering to said living being is oral or parenteral.

Cont

13(currently amended). A method of treating hyperinsulinemia, said method comprising administering a pharmaceutically effective amount of melatonin for inhibiting insulin release to a living being suffering from said hyperinsulinemia, wherein said melatonin acts to inhibit said insulin release by interacting with a melatonin-specific receptor in β-cells of pancreatic islets in said living being suffering from said hyperinsulinemiaThe method as defined in claim 9, wherein said administering to said living being is topical, rectal, subcutaneous, intravenous, intramuscular, intraperitoneal, intranasal, intravaginal, intrabuccal or sublingual.

REMARKS

This is a request for reconsideration and amendment after final rejection.

Claim changes have been proposed to overcome the rejections in the final Office Action dated April 22, 2003.

A Declaration swearing back of the Peschke reference also accompanies this request for reconsideration and amendment after final rejection.

I. Proposed Claim Changes

Claims 5 to 10 have been canceled. Claims 11 to 13 have been amended to include the features and limitations of independent claim 9 and dependent claim 10 (at least one compound limited to melatonin), so that they are independent claims.

Entry of the proposed claim changes is respectfully requested to save prosecution effort and cost.